### AUSTIN CITY CLERK RECEIVED

## PERSONAL FUNDS - LOANS AND ESTIMATERS 49

This report is for a candidate or officeholder who loans personal funds to his or her campaign or makes expenditures from personal funds in support of his or her campaign. The amounts loaned or expended shall be reported as follows.

Beginning on the date an individual becomes a candidate in a City election and continuing until midnight on the tenth day before a City election, a candidate shall report the new loans or expenditures cumulating to \$25,000 or more within seven business days after the total reaches \$25,000. Additional loans or expenditures cumulating \$25,000 or more shall be reported within seven business days each time the total reaches \$25,000. [City Code, Section 2-2-27(A)(1)]

If the loans or expenditures cumulating to \$25,000 or more occur during the period beginning on midnight on the 10<sup>th</sup> day before an election and ending at midnight on the day before the election, the report shall be filed with the City Clerk within twenty-four hours after the total reaches \$25,000. Additional loans or expenditures totaling \$25,000 or more shall be reported within twenty-four hours each time the total reaches \$25,000. [City Code, Section 2-2-27(A)(2)]

Name of candid	late/officeholder: Pebe	cca Bray
Reporting Per	iod:	
First d	ay of candidacy – Midnight on the 10	<sup>th</sup> day prior to City election
☐ Midnig	ght on the 10 <sup>th</sup> day before City electio	n – Midnight on the day before election
inter the follow	ving information concerning loans of	personal funds to the campaign:
	Amount of loan	Date of loan
		· · · · · · · · · · · · · · · · · · ·

Enter the following information concerning the person or persons to whom expenditures were made from personal funds and the total amount, purpose and date of each expenditure:

Name	Street Addres	s Amount	Purpose	Date
	SOR	a Hacing		
	) CC			
	,			

SCHEDULE ATX. 2 Reference § 2-2-27, Austin City Code

# STATE OF TEXAS VERIFICATION

I swear that the preceding disclosure of loans and expenditures from personal funds of a candidate or officeholder filed herewith is in all things true and correct and fully shows all information required to be reported by me pursuant to City Code, Section 2-2-27 for the reporting period indicated.

Signature of Candidate/Officeholder

### **POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS**

RECEIVED SCHEDULE G 2014 OCT 27 AM 8 49

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	Gift/Awards/Memorials Expense Salaries/Wages/Co Legal Services Solicitation/Fundra Food/Beverage Expense Travel In District Polling Expense Travel Out Of Dist Printing Expense Office Overhead/F	ontract Labor Loan Repayment/Reimbursement ising Expense Transportation Equipment & Related Expense Contributions/Donations Made By trict Candidate/Officeholder/Political Committee				
The instruction Guide explains how to complete this form.						
1 Total pages Schedule G:	2 FILER NAME  REDECCA Bray  3 ACCOUNT # (Ethics Commission Filers)					
4 Date	5 Payee name					
9.27.14		touse				
6 Amount (\$)	7 Payee address; City; State; Zip Code					
44.18	9600 Escarpment Blvd.					
Reimbursement from political contributions intended	Austin, TX 78749					
8 PURPOSE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)				
OF EXPENDITURE	food expense	volunteer lunch				
Date	Payee name					
9.30.14	KC Strategies					
Amount (\$)	Payee address; City; State, Zip Code					
685421	3571 Far West Bivd #196 Austin, TX 78731					
political contributions intended						
interided	1,1.0 . , (\(\chi\)	<u> </u>				
PURPOSE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)				
PURPOSE OF	Category (See categories listed at the top of this schedule)					
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)  CONSULTING EXPENSE  Payee name					
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)  CON SULTING EXPENSE					
PURPOSE OF EXPENDITURE  Date Amount (\$)	Category (See categories listed at the top of this schedule)  CONSULTING EXPENSE  Payee name  Mycrs Consult  Payee address; City; State; Zip Code  809 CGNYCN CRECK	Communications  Ing  Drive				
PURPOSE OF EXPENDITURE  Date  Amount (\$)	Category (See categories listed at the top of this schedule)  CONSULTING EXPENSE  Payee name  Mycrs Consult  Payee address; City; State; Zip Code  809 CGNYCN CRECK	Communications				
PURPOSE OF EXPENDITURE  Date Amount (\$) Reimbursement from political contributions inlended  PURPOSE	Category (See categories listed at the top of this schedule)  CONSULTING EXPENSE  Payee name  Mycrs Consult  Payee address; City; State; Zip Code  809 CONYON CREK	Communications  Ing  Drive				
PURPOSE OF EXPENDITURE  Date Amount (\$) Reimbursement from political contributions inlended	Category (See categories listed at the top of this schedule)  CONSULTING EXPENSE  Payee name  Mycrs Consult  Payee address; City; State; Zip Code  809 CGNYCN Creek  Austhn, TX 78	Communications Ing Drive 3746				
PURPOSE OF EXPENDITURE  Date OF Amount (\$) Reimbursement from political contributions intended  PURPOSE OF	Category (See categories listed at the top of this schedule)  CONSULTING EXPENSE  Payee name  Mycrs Consult  Payee address; City; State; Zip Code  809 CGNYCN Creek  Austin, Tx 78  Category (See categories listed at the top of this schedule)	COMMUNICATIONS  ING  Drive  8746  Description (If travel outside of Texas, complete Schedule T)				
PURPOSE OF EXPENDITURE  Date  Amount (\$) Reimbursement from political contributions inlended  PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)  CONSULTING EXPENSE  Payee name  Mycrs Consult  Payee address: City: State: Zip Code  809 CGNYCN Creek  Austin, TX 78  Category (See categories listed at the top of this schedule)  CONSULTING  Payee name	COMMUNICATIONS  ING  Drive  8746  Description (If travel outside of Texas, complete Schedule T)				
PURPOSE OF EXPENDITURE  Date  Amount (\$)  Reimbursement from political contributions intended  PURPOSE OF EXPENDITURE  Date  Amount (\$)	Category (See categories listed at the top of this schedule)  CONSULTING EXPENSE  Payee name  Mycrs Consult  Payee address: City: State: Zip Code  809 CGNYCN Creck  Austin, TX 78  Category (See categories listed at the top of this schedule)  CONSULTING  Payee name  Home Depot #  Payee address: City: State: Zip Code	Communications  Ing  Drive  3746  Description (If travel outside of Texas, complete Schedule T)  Compalgn Manager  - 6570				
PURPOSE OF EXPENDITURE  Date  Amount (\$)  Reimbursement from political contributions inlended  PURPOSE OF EXPENDITURE  Date  Date  Amount (\$)	Category (See categories listed at the top of this schedule)  CONSULTING EXPENSE  Payee name  Mycrs Consult  Payee address: City: State: Zip Code  809 CGNYCN Creck  Austin, TX 78  Category (See categories listed at the top of this schedule)  CONSULTING  Payee name  HOME DEDCT #	Communications  Ing  Drive  3746  Description (If travel outside of Texas, complete Schedule T)  Compalgn Manager  - 6570				
PURPOSE OF EXPENDITURE  Date  Amount (\$)  Reimbursement from political contributions intended  PURPOSE OF EXPENDITURE  Date  Amount (\$)	Category (See categories listed at the top of this schedule)  CONSULTING EXPENSE  Payee name  Mycrs Consult  Payee address; City; State; Zip Code  809 CGNYCN Creek  ALISTIN, TX 75  Category (See categories listed at the top of this schedule)  CONSULTING  Payee name  HOME DEDCT #  Payee address; City; State; Zip Code  1200 Home DEPCT 5	Communications  Ing  Drive  3746  Description (If travel outside of Texas, complete Schedule T)  Compalgn Manager  - 6570				
PURPOSE OF EXPENDITURE  Date  Amount (\$)  Reimbursement from political contributions inlended  PURPOSE OF EXPENDITURE  Date  Amount (\$)  Reimbursement from political contributions inlended	Category (See categories listed at the top of this schedule)  CONSULTING EXPENSE  Payee name  Mycrs Consult  Payee address; City; State; Zip Code  809 CGNYCN Creek  ALISTIN, TX 75  Category (See categories listed at the top of this schedule)  CONSULTING  Payee name  HOME DEDCT #  Payee address; City; State; Zip Code  1200 Home DEPCT 5	Communications  Ing  Drive  8746  Description (If travel outside of Texas, complete Schedule T)  Campaign manager  - 6570  31vd.				
PURPOSE OF EXPENDITURE  Date  Amount (\$)  Reimbursement from political contributions intended  Date  Date  PURPOSE OF EXPENDITURE  Date  Amount (\$)  Reimbursement from political contributions intended	Category (See categories listed at the top of this schedule)  CONSULTING EXPENSE  Payee name  Mycrs Consult  Payee address: City: State: Zip Code  809 CGNYCN Creek  Austin, TX 78  Category (See categories listed at the top of this schedule)  COnsulting  Payee name  Home Depot #  Payee address: City: State: Zip Code  1200 Home Depot 5	Communications  Ing  Drive  3746  Description (If travel outside of Texas, complete Schedule T)  Compalgn Manager  - 6570  3145				

### POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

P.O. Box 12070

### SCHEDULE G

(512) 463-5800

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Gift/Awards/Memorials Expense Salaries/Wages/Contract Labor Loan Repayment/Reimbursement Accounting/Banking Legal Services Solicitation/Fundraising Expense Transportation Equipment & Related Expense Consulting Expense Food/Beverage Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Travel In District Event Expense Polling Expense Travel Out Of District Fees Printing Expense Office Overhead/Rental Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 Total pages Schedule G: 2 FILER NAME 3 ACCOUNT # (Ethics Commission Filers) Rebecca Bray 4 Date 10.6.14 NOrth by Northwest
7 Payee address; City; State; Zip Code
10010 N. Capital of Texas Huy. Reimbursement from political contributions Austin. TX 78759 (a) Category (See categories listed at the top of this schedule) **PURPOSE** OF EXPENDITURE volunteer food food I beverage MOTZCITTS

Payee address; City; State; Zip Code 3805 Lake Austin Blvd. 3.94
Reimbursement from political contributions Description (If travel outside of Texas, complete Schedule T) **PURPOSE** OF EXPENDITURE beverage expense Date HCQ - Q ASIAN KITCHEN
Payee address: City: State: Zip Code 0.15.14 Amount (\$) 16.72 3742 Far W. Blvd #113 Reimbursement from political contributions Austin, TX 78731 PURPOSE OF EXPENDITURE Staff lunch food expense TEXAS Land and Cattle
Payee address: City: State; Zip Code 10.00.14 2037 Reimbursement from political contributions 1101 S MOPAC EXPY Category (See categories listed at the top of this schedule)

Description (If travel outside of Texas, complete Schedule T) **PURPOSE** food expense consulting dinher EXPENDITURE ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Texas Ethics Commission

### SCHEDULE G

### POLITICAL EXPENDITURES **MADE FROM PERSONAL FUNDS**

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense	Gift/Awards/Miemorials Expense Salaries/Wages/Contract Labor Loan Repayment/Reimbursement				
Accounting/Banking Consulting Expense	Legal Services. Solicitation/Fundraising Expense Transportation Equipment & Related Expense Food/Beverage Expense Travel In District Contributions/Donations Made By				
Event Expense	Polling Experse Travel Out Of District Candidate/Officeholder/Political Committee				
Fees	Printing Expense Office Overhead/Rental Expense OTHER (enter a category not listed above)				
	The Instruction Guide explains how to complete this form.				
1 Total pages Schedule G	2 FILER NAMF 3 ACCOUNT # (Ethics Commission Filers				
	Febecca Bray				
4 Date	5 Payee name				
10.20.14	Home Depot # 6570				
6 Amount (\$)					
Reimbursement from	1200 Home Depot Blvd.				
political contributions intended	Austin, Tx 78745				
8 PURPOSE OF	(a) Category (See Falegories listed at the top of this schedule) (b) Description (Ill Pavel outside of Texas, complete Schedule T)				
EXPENDITURE	other Sign Supplies				
Date	Payee name				
10.23.14	HEB				
Amount (\$)	Payee address: City; State; Zip Code				
43.65	5800 W. Slaughter I-n				
Reimbursement from political contributions					
intended	17USTIM, 1X 10149				
PURPOSE OF	Category (See Integeries listed at the top of this schedule)  Description (if mayor outside of Texas, complete Schedule T)				
EXPENDITURE	food/beverage volunteer supplies				
Date	Payee name				
10,25.14	KC Strategies				
Amount (\$)	Payee address: City; State; Zip Code				
41,000.00	3571 Far West Blvd. #196				
Reimbursement from political contributions intended	Prustin, TX 78731				
PURPOSE	Category (See atagories listed at the top of this schedule)  Description (It have outside of Texas, complete Schedule T)				
OF	signs, media, hangers,				
EXPENDITURE					
	Consulting expense fryers				
Date	$1 \wedge \dots \qquad 1 \qquad \qquad 1 \wedge \dots $				
Date 10.25.14	Consulting expense fryers				
10.25.14 Amount (\$)	Payee name  Mail Chinp  Payee address. City; State; Zip Code				
10.25.14 Amount (\$) 15.90	Consulting expense fryers  Payee name  Mail Chinp				
10.25.14 Amount (\$)	Payee name  Mail Chinp  Payee address. City; State; Zip Code				
Amount (\$)  15.  Reimbursement from political contributions intended	Payee name  Mail Chinp  Payee address City; State; Zip Code  513 Means 5t Ste 404				
Amount (\$)  Amount (\$)  Reinbursement from political contributions	Payee name    Mail Chind   Payee address: City; State; Zip Code   513 means 5t 5te 404   Atlanta, GA 30318   Category (Secretary of State)   Description (If wavel outside of Texas, complete Schedule T)				
Amount (\$)  Amount (\$)  Semibursement from political contributions inlended  PURPOSE OF	Payee name  Mail Chindp  Payee address City: State: Zip Code  513 Means 5t Ste 404  Atlanta, GA 30318				

### **POLITICAL EXPENDITURES** MADE FROM PERSONAL FUNDS

P.O. Box 12070

### SCHEDULE G

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	Gift/Awards/Idem Legal Services Food/Beverage E Polling Expense Printing Expense	Solicitation/Fur xpense Travel In Distr Travel Out Of	s/Contract Labor ndraising Expense ict District ad/Rental Expense	Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee CTHER (enter a category not listed above)
1 Total pages Schedule G	2 FILER NAME			3 ACCOUNT # (Ethics Commission Filers)
Ч	Keb	zcca 13ral	<b>1</b>	
4 Date	5 Payee name		,	
10.35.14	Wate	:r100 /ce 1	<u>House</u>	
6 Amount (\$)	7 Payee address City: State; Zip Code			
Reimbursement from	9600	ESCArpme	ent Bl	vd.
political contributions intended	Austin TX 78749			
8 PURPOSE		regories listed at the top of this schedule)	(a) Chasoriptica	tif mayel outside of Texas, complete Schedule T)
OF EXPENDITURE	fond	ev Dela Se	1/20110	nteer food
	<del></del> -	ex pense	1 000	riteer 1000
Date	Payee name			
Amount (\$)	Payee address:	City; State; Zip Code	1	
Reimbursement from political contributions intended				
PURPOSE OF EXPENDITURE	Category (Sre)	regories listed at the top of this schedule)	Description	ा (If travel outside of Texas, complete Schedule T)
Date	Payee name			
Amount (\$)	Payee address	City; State; Zip Code	3	
Reimbursement from political contributions intended				
PURPOSE	Category (Sec	rtegories listed at the top of this schedule)	Descript.	: III travel outside of Texas, complete Schedule T)
OF EXPENDITURE				
Date	Payee name			
Amount' (\$)	Payee address	City: State; Zip Code	e	
Reimbursement from political contributions intended	<u>.</u>			
PURPOSE OF EXPENDITURE	Category (Se.	recipionies listed at the top of this scriedule)	Ousas i	erell travel outside of Texas, complete Schedule T)
	ATTAC	ADDITIONAL COPIES OF TI	HIS SCHEDULE :	KEEDED